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PTO/SB/30 (10-01)
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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

## REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Commission for Patents Box RCE Washington, DC 20231

information unless it displays a valid OMB control number.				
Application				
Number	10/578,769			
Filing Date				
	May 9, 2006			
First Named				
Inventor	TAKEI			
Art Unit				
	2821			
Examiner Name				
	Dieu Hien Duong			
Attorney Docket				
Number	NITT.0327			

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plan application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

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1.	a. ☐ Previously su i. ☐ Consid ii. ☐ Consid iii. ☐ Other b. ☒ Enclosed i. ☒ Respo	ired under 37 CFR 1.114  ubmitted Her the amendment(s)/reply under Her the arguments in the Appeal  nse/Preliminary Amendment it(s)/Declaration(s)	Brief o	r Reply B	rief previou	sly filed on	DS)	
2.	<ul> <li>Miscellaneous</li> <li>a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of month. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)</li> <li>b. Other:</li> </ul>							
3.	<ul> <li>The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.</li> <li>a.  The Director is hereby authorized to charge any additional fees, or credit any overpayments to Deposit Account No. 08-1480 <ol> <li>ERCE fee required under 37 CFR 1.17(e)</li> <li>Petition fee (37 CFR 1.136 and 1.17)</li> <li>Excess claims fee</li> <li>Checks in the amounts of \$810.00 for the RCE fee and \$130.00 for the 1-month extension of time fee for a large entity are enclosed</li> <li>Payment by credit card (Form PTO-2038 enclosed).</li> </ol> </li> <li>Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</li> </ul>							
		SIGNATURE OF APPLICA	NT, AT	TORNE	, OR AGE	NT REQUIRED		
Name (Print/Type) Juam Carlos A. Marquez		Reg	istration NO	. (attorney/agent)	34,072			
Name (Print/Type)		HI AL			Registration NO. (attorney/agent)			
Signature Date March 13, 2009						·		
CERTIFICATE OF MAILING OR TRANSMISSION								
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the United States and Trademark Office on the date shown below.								
Name (Print/Type)								
Signature Date								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Tradearmk Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.

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	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED								
Na	me (Prir	nt/Type)	Juan Carlos A. Marque	z		Reg	Registration NO. (attorney/agent) 34,072		
Name (Print/Type)			Registration NO. (attorney/agent)						
Signature			Date		/larch 1 <u>3, 2009</u>				
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